Impact of the Prescription Drug User Fee Act of 1992 on the Speed of New Drug Development

Kenneth I Kaitin, Ph.D. Director, Tufts Center for the Study of Drug Development

> FDA Public Hearing on PDUFA Washington, D.C., September 15, 2000

Regulatory Initiatives to Speed **Availability of High Priority Drugs**

- ◆ Subpart E Procedures (1988)
- ◆ Accelerated Approval Regulations (1993)
- ◆ Cancer Initiatives (1996)

Tifts CSDD 😝



Development Times for Accelerated, Subpart E, and Other NCE Approvals, 1995-99

	7356		SEP 19	#9 : 26
		,		
			خب	
		···		

			• 4:	
			ائي چو	
***************************************			- -	

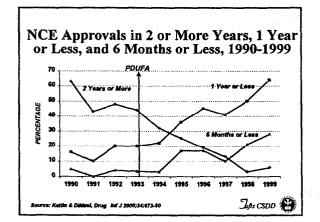
			· · · · · · · · · · · · · · · · · · ·	
<u> </u>				

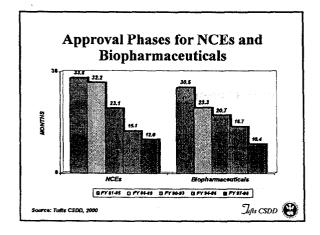
Prescription Drug User Fee Act of 1992 Performance Goals

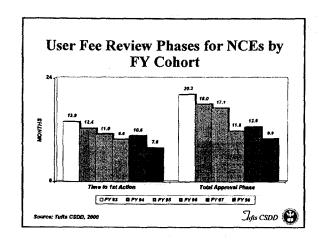
- ♦ 90% of Priority applications reviewed in 6 months
- ♦ 90% of Standard applications reviewed in 12 months
- ♦ Phased in over 5 years

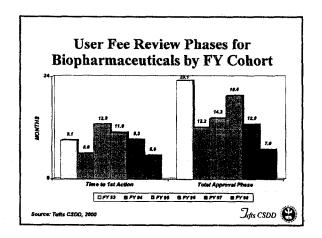
Is CSDD 🤪

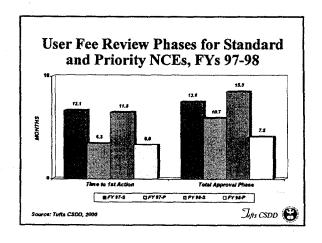




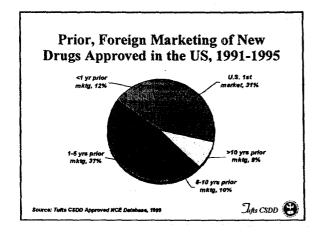


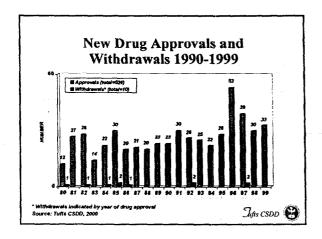






Prior, Foreign Marketing of New Drugs Approved in the US, 1996-1998 Styr prior U.S. 1st market, 47% 1-6 yrs prior mktg, 14% 6-10 yrs prior mktg, 4% Source: Kaltin & Healy, Drug inf J 2000;34:1-14





Conclusions

- ◆ PDUFA most significant piece of drug legislation since 1962 Amendments
- ♦ Overwhelming success in speeding drug review process and changing the relationship between agency and sponsors
- ♦ Public ultimately benefits from faster access to important new drugs

This CSDD	É



Tufts Center for the Study of Drug Development

Tufts University, Boston, Massachusetts, USA Kenneth I Kaitin, Ph.D., Director

Internet www.tufts.edu/med/research/csdd

email kkaitin@infonet.tufts.edu